



Bib Data Sheet


**UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office**

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Washington, D.C. 20231

SERIAL NUMBER 09/436,146	FILING DATE 11/09/1999 RULE -	CLASS 707	GROUP ART UNIT 2771	ATTORNEY DOCKET NO. 247/235
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APPLICANTS
 JAN C. ZAWADZKI, Carlsbad, CA ;
 CHRISTOPHER E. DORNSIFE, Poway, CA ;
 EDWARD F. ROSS, Carlsbad, CA ;
 MARGARET TAN, Oceanside, CA ;
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 DENNIS BERTKEN, Encinitas, CA ;
 DENISE ROLEN, San Diego, CA ;
 MARK LOVELAND, San Diego, CA ;
 MICHAEL BASA, San Diego, CA ;

**** CONTINUING DATA *******
 THIS APPLN CLAIMS BENEFIT OF 60/108,261 11/12/1998
mb

**** FOREIGN APPLICATIONS *******
mb

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
**** 12/02/1999**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>mb</i> Examiner's Signature _____ Initials _____	STATE OR COUNTRY CA	SHEETS DRAWING 32	TOTAL CLAIMS 26	INDEPENDENT CLAIMS 2
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ADDRESS

 22249

TITLE

 CENTRALIZED SYSTEM AND METHOD FOR MANAGING ENTERPRISE OPERATIONS

FILING FEE RECEIVED 499	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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WASHINGTON, D.C. 20231
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CONFIRMATION NO. 6202

SERIAL NUMBER 09/436,146	FILING DATE 11/09/1999 RULE	CLASS 707	GROUP ART UNIT 2177	ATTORNEY DOCKET NO. 247/235
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APPLICANTS

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MICHAEL BASA, San Diego, CA;

**** CONTINUING DATA *******

This appln claims benefit of 60/108,261 11/12/1998

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
** 12/02/1999

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 32	TOTAL CLAIMS 26	INDEPENDENT CLAIMS 2
Verified and Acknowledged	Examiner's Signature <i>me</i> Initials <i>me</i>				

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TITLE

CENTRALIZED SYSTEM AND METHOD FOR MANAGING ENTERPRISE OPERATIONS

FILING FEE RECEIVED 634	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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